

***I would like to support your worthwhile organization.  
Enclosed is my tax deductible check/money order in  
the following amount: \$ \_\_\_\_\_***

*Please List Me as: (Check one)*

\_\_\_\_\_ Donor  
under \$100

\_\_\_\_\_ Patron  
\$500-\$1000

\_\_\_\_\_ Sponsor  
\$100-\$500

\_\_\_\_\_ Benefactor  
over \$1000

Please bill my donation to my \_\_\_\_\_ Master Card \_\_\_\_\_ Visa

Number: \_\_\_\_\_

Expires: \_\_\_\_\_

\_\_\_\_\_  
Signature

FIRST NAME \_\_\_\_\_ INITIAL \_\_\_\_\_ LAST NAME \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_ APARTMENT/SUITE NUMBER \_\_\_\_\_

CITY/COUNTY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

***\* Donations over \$100 will receive  
a Complementary Contributing  
Membership to NAPWA***

**1710104**

Return to:

**NAPWA  
P.O. Box 18345  
Washington, D.C. 20036**